



FILE

JAN 18 2010

Administrative Office of the Courts  
BY *[Signature]*JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING  
DECEMBER 31, 2010

RECEIVED

JAN 22 2010

GENERAL INFORMATIONCOMMISSION  
ON ETHICS

1. Name Alvin R. Kacin
2. Title Elko Township Justice of the Peace and Municipal Ju
3. Mailing address PO Box 176  
Elko, NV 89803
4. Length of residence in Nevada 16 years
5. County in which you are registered to vote Elko
6. Length of residence in the county in which you are registered to vote 15 years

COMPENSATION FOR EXTRA-JUDICIAL ACTIVITIES

7. Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. See Canon 4I(2)(a)(ii). Attach additional sheets if necessary.

Date	Nature and Place of Activity	Name of Payor	Amount
<u>None</u>			

INCOME

8. Disclose each source of income received by you and by each member of your household who is 18 years of age or older. No listing of individual clients, customers, or patients is required. Income received from such sources should be disclosed under a general heading such as "professional services." See Canon 4I(2)(a)(iii). Attach additional sheets if necessary.

Source of Income	Recipient
<u>Judicial Salary</u> <u>(Elko County)</u>	<u>Alvin R. Kacin</u>
<u>Employee Salary</u> <u>(Minningitar</u> <u>Healthcare)</u>	<u>Raqueal R. Kacin</u>

## REAL PROPERTY

Disclose the specific location, nature, and particular use of any real estate which has a fair market value of \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or beneficial interest, and is located in Nevada or any adjacent state. See Canon 4I(2)(a)(iv). Specific addresses are required - list the street address or legal description. You must designate whether the property is unimproved vacant land, agricultural land, commercial building, apartments, single-family, rental, etc. Attach additional sheets if necessary.

Specific Location	Nature/Particular Use	Interest Holder
1290 E. Winding Creek Dr. (Eagle ID.)	Single-Family	Alvin R. Kacin Raquel R. Kacin

## CREDITORS

10. Disclose the name of each creditor to whom you or a member of your household owes \$5,000 or more unless: (a) the debt is secured by a mortgage or deed of trust on real property which is not required to be listed under question 9 above, or (b) the debt is one for which a security interest in a motor vehicle for personal use was retained by the seller or its assignee or designee. See Canon 4I(2)(a)(v). Attach additional sheets if necessary.

Name of Creditor	Name of Debtor
Bank of America	Raquel R. Kacin
Washington Federal	Alvin R. Kacin
	Raquel R. Kacin

## BUSINESS ENTITIES

11. List each business entity in which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner (in whole or in part), limited or general partner, or holder of any class of stock or security representing one percent or more of the total outstanding stock or securities issued by the business entity. See Canon 4I(2)(a)(vi). Attach additional sheets if necessary.

Business Entity	Nature of Involvement	Person Involved
Advanced Health- care Solutions	Owner	Raquel R. Kacin

# **GIFTS, BEQUESTS, FAVORS, OR LOAN**

Disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or loan to you or to a member of your family residing in your household if its value exceeded \$200, unless this disclosure is not required by Section 4D of the Code of Judicial Conduct. See especially Canon 4D(5)(h) and 4I(2)(a)(vii). Attach additional sheets if necessary.

Date	Name and Place of Gift	Name of Donor	Amount
<del>None</del>	<del></del>	<del></del>	<del></del>
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I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND COMPLETE.

January 14, 2010  
Date

[Signature]  
Signature

File this form with the State Court Administrator.  
Deliver or mail to:

State Court Administrator  
Administrative Office of the Courts  
201 S. Carson Street, Suite 250  
Carson City, Nevada 89701-4702  
Telephone: (775) 684-1700